

REPORTS INVENTORY						# 00
PREPARE IN DUPLICATE						CONTROL NO. 00053-2
1. TITLE OF REPORT (if a fill-in report include Form No.) Records Review					2. TYPE OF REPORT <input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA <input checked="" type="checkbox"/> PERSONNEL <div style="border: 1px solid black; padding: 2px;">LOGISTICS</div> <div style="border: 1px solid black; padding: 2px;">MEDICAL</div>		<div style="border: 1px solid black; padding: 2px;">TRAINING</div> <div style="border: 1px solid black; padding: 2px;">SECURITY</div> <div style="border: 1px solid black; padding: 2px;">FINANCE</div>		ADMIN. GENERAL OTHER (specify)		
4. NO. OF COPIES PREPARED 3		5. FREQUENCY (weekly, monthly, quarterly, etc.) Monthly		6. DISTRIBUTION (No. of components not number of copies) Hq Comd, USAF		
7. FORMAT (memorandum, form computer print-out, etc) Form Letter		8. ADP PROCESSING <input checked="" type="checkbox"/> YES IF YES GIVE ADP PROCESSING NO. <div style="border: 1px solid black; padding: 2px;">HAF-P223</div>		9. DIRECTIVE AUTHORITY REQUIRING REPORT AF Manual 30-3		
10. PREPARING COMPONENT (include lowest level contributing information to report) AF Branch/MMPD			11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) None			
12. COST FACTORS						
A. MANUAL PREPARATION AND REVIEW COSTS						
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	= COST PER YEAR
GS-05 to GS-15	\$5.00	1 1/2	=	\$7.50	12	\$90.00
B. COSTS OF COMPUTER PRODUCED REPORTS						
TOTAL COSTS PER YEAR						
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (In addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. Directed by US Air Force.						
14. FUTURE GOALS						
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE					ESTIMATED SAVINGS <div style="border: 1px solid black; padding: 2px;">MAN-HOURS</div> <div style="border: 1px solid black; padding: 2px;">DOLLARS</div>	
16. DATE OF INVENTORY 16 October 1970		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Chief, Processing Section				18. EXTENSION <div style="border: 1px solid black; width: 50px; height: 20px;"></div>